

Child Abuse

Edited by Eli H. Newberger, M.D.



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Assistant Professor of Pediatrics,
Harvard Medical School; Director,
Family Development Study,
Children's Hospital Medical
Center, Boston



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Foreword

In recent years, when college students have been asked about how the quality of life of a society may be judged, they generally answer, "By how well it cares for its children". That this was not so until recent decades is evident from the historical introduction, "The Roots of Child Protection," to this volume.

Certainly, it was not until the latter part of the nineteenth century that the child began to be perceived as having rights of his or her own. Thus the public support of universal education for children, the development of the children's courts along with the child guidance clinics, the institutionalization of social work as a profession, and the effort to eliminate child labor had their major impacts during the early part of the twentieth century. A major landmark was the calling of the 1909 White House Conference on Children by President Theodore Roosevelt, which led to the establishment of the United States Children's Bureau in 1912, reflecting the interest of the American people in learning more about their children and in providing more wholesome environments for children's growth and development.

But greater progress in the rearing of children had to await further developments. The improvement in social and economic conditions along with the spectacular advances in biomedical and bio-behavioral research made possible striking reductions in infant mortality rates, and these reductions in morbidity and mortality from infectious and nutritional disorders ushered in the healthiest period in history for American children.

The work to improve the lives of children, however, was far from over following these advances. Perhaps they made it possible to focus on other problems that had not yet been addressed effectively. This was particularly true for the medical profession, as other child-caring professions—especially that of child welfare—had long been aware of the problems of neglect and abuse of infants and children.

About two decades ago, as the professions became more explicitly aware of child abuse, a whole new movement for the care and protection of children began to develop. Laws requiring the reporting of instances of child abuse have now passed in all fifty states. Particularly in medicine, a new literature has been developed that is concerned about how to define and to manage more effectively instances of child abuse with its complexity of familial and societal problems.

Therein lies the importance of this volume. Over the past two decades all of the child-caring professions have become more so-

phisticated in dealing with child abuse and neglect issues. They have also, as the chapters written by a variety of professionals in this volume so abundantly illustrate, become more interdependent in trying to work with these problems.

Yet the extensive experience of each of the professions suggests new orders of complexity for practitioners. This growing body of experience, therefore, makes this volume a much needed encyclopedia of current knowledge in the field.

Interdisciplinary activity is never easy and has many pitfalls. This volume avoids that which the late Justice Frankfurter cautioned against when he wrote, "The need for breaking down sterilizing departmentalization has been widely felt. Unfortunately, however, a too frequent way of doing it has been, wittily but not too unfairly, described as the cross-sterilization of the social sciences. That is a tendency by which a difficult problem, say of law, is solved by relying on the formulation of a dubious truth in some other field."

From this rich collection of chapters, those interested in improving their skills will find much to learn. They, along with the children and families they serve, will benefit immeasurably. In the process, we can improve the quality of life for which we as a nation constantly strive.

Julius B. Richmond, M.D.

Preface

The literature on child abuse has grown impressively since the middle 1960s, when newly passed reporting laws defined a diagnostic responsibility for physicians. Conflict remains, however, with respect to virtually every aspect of knowledge and practice. What is child abuse? Is it a syndrome or a symptom? Or is it many manifestations of many causes? Can it really be diagnosed? To whom should it fall to prevent and to treat child abuse?

The passion and rancor that these cases stimulate within and among us derive in part from our confusion about what child abuse is and what can be done about it. But there is another source of conflict, which we too often ignore. All of us are affected profoundly by the plight of children in jeopardy. Their cries resonate with our earliest fantasies and our deepest fears. In our anxiety, sadness, and rage, we may find it difficult to think clearly, much less to work harmoniously with colleagues in other professions to heal the children's wounds and to help their troubled families.

No subject of medical work is more intellectually and emotionally demanding than child abuse. The task of this book is to equip the physician and his or her colleagues to meet this challenge. This is done by counterposing research and clinical discussions in such a way as to deal forthrightly with the knowledge base, such as it is, and with the salient technical and personal issues of professional practice, as they are perceived from the vantage points of the principal disciplines.

Each contributor to this volume was asked to hold in view the physician's education, interest, and ethical calling. A special effort was sought to give not only data and guidance but also the critical tools with which to interpret others' findings and prescriptions. For law, nursing, and social work, a short historical review of the particular field complements a discussion of the profession's approach to child abuse. Here, the intent is to foster the capacity and respect for competent interdisciplinary work. In its history are always embedded the ethics, attitudes, and intellectual structure of a profession. As with a patient, not to know the history is not to comprehend one's role and responsibility.

Following an introduction to the history of children and of child protection, the book is organized in two sections. The first treats four subjects of general relevance to medical professionals: what we know about child abuse and family violence; social isolation; sexual abuse; and program organization and administration. The second addresses the principles and ethics of practice from the perspectives

of the lawyer, pediatrician, radiologist, surgeon, psychiatrist, nurse, psychologist, and social worker.

There is some overlap in the telling of each profession's story and its concern and perceived mandate to treat and to protect children. This, in the editor's view, is not needless redundancy; it is essential for an understanding of the traditions that undergird practice in the present day. Each profession continues to seek an identity in this relatively new area of practice. A heightened appreciation for our shared ethics and values should help to allay the conflicts that seem often to impede our work. Conflicts among us, however, can be productive in the diagnosis and treatment of child abuse. When hard choices have to be based on soft data, lively discussions can guide better decisions. No one can go it alone in this field; and everyone will benefit from informed communication.

I thank the following for their special contributions to this volume: Robert ten Bensel of the University of Minnesota, a pediatrician who stimulated my interest in the history of children and who inspired Michael Robin's historical introduction; Curtis Vouwie and Elizabeth Welch of Little, Brown, and Company, who patiently and thoughtfully worked with editor and contributors on the concept of the book and through its many outlines, drafts, and deadlines; my keen and forbearing associates at Children's Hospital, Irwin Bennett, Richard Bourne, Roy Bowles, Jessica Daniel, Howard Dubowitz, Robert Hampton, Ann Salomon, Betty Singer, Jane Snyder, and Kathleer White, who can always be counted on to work tirelessly on behalf of children and to raise good and hard questions; and Carolyn and Mary Helen, my cherished wife and daughter who have loved and sustained me through the many swirls and vexations of a twelve-year interest in child abuse, of which the editing of this book represents, in considering the aggregate, one of the smaller impositions on the life of our family. I acknowledge with appreciation grant support from the Center for Studies of Crime and Delinquency in the National Institute of Mental Health and from the National Center on Child Abuse and Neglect, both in the Department of Health and Human Services in Washington, D.C.

E. H. N.

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Historical Introduction Sheltering Arms: The Roots of Child Protection

Michael Robin

The history of childhood is a nightmare from which we have only recently begun to awaken.

THE HISTORY OF CHILDHOOD
LLOYD DE MAUSE

For children there has never been a golden age. Throughout the history of Western societies, children have been killed, abandoned, severely beaten, and sexually abused. In fact, the further back we go in history, the harsher and crueler appears to have been the lot of children. Considered the property of their parents or the state, children in the past had little recourse or protection from adult society, which frequently rationalized abusive behavior as being for the good of the child. To a large extent, contemporary concern with child abuse and neglect is the result of redefining child-rearing practices that have been occurring since time immemorial.

Despite the widespread evidence of child maltreatment in our own time, the history of children reveals a progressive improvement in their general care, protection, and rights. Rather than provide a catalogue of abuses that children have suffered in the past, this introduction proposes that certain child-rearing practices considered abusive today were, when viewed in their social and historical contexts, once "reasonable" ways of dealing with children.

INFANTICIDE

The practice of *infanticide*, the willful killing of newborn babies, was widely accepted among ancient and prehistoric peoples as a legitimate means of dealing with unwanted children. Because resources were scarce and there was a need to limit family size, any child that cried too much; was sickly, deformed, less than perfect in size or shape; or otherwise failed to conform to the standards set by such medical writings as "How to Recognize the Newborn That is Worth Rearing" was vulnerable to being killed [12]. Furthermore, girls, twins, or children of unmarried parents were frequent victims of infant murder. Methods used to dispose of children included exposure, drowning, beating, mutilation, suffocation, "potting" in jars, and being thrown into dung heaps or burning pits. In the metaphor of the Greek dramatist Euripides, infants were exposed on every hill and roadside, "a prey for birds, food for wild beasts to rend" [12].

Considered an economic burden to their families because they required a dowry and belonged to their husband's family after marriage, females were at high risk of being killed. It was rare in some cultures for more than one female to be raised per family, and Hilarion's instructions to his wife Alis (1 B.C.) were typical of how these matters were discussed within families. "If, as may well happen, you give birth to a child, if it is a boy let it live; if it is a girl, expose it [12]. The greater frequency of female infanticide was reflected in a large imbalance of males over females, which survived at least through the Middle Ages and probably into early modern Europe, where the historian Mols noted a "curious" surplus of boys over girls between 1450 and 1750 [30].

In ancient society, the *Patria Potestas* (Father as absolute authority) granted a father the right of life or death over his children. The Greeks and Romans both killed their weak and deformed offspring in the hope that only the strong would survive. The survival of the fittest was deemed by Plato, Aristotle, Seneca, and others as a necessary means to strengthen the race, and was reinforced by the Roman Law of the Twelve Tables which forbade the rearing of defective children [36]. Fathers of children who did survive were expected to be revered by their children as if they were gods. Children themselves had no legal rights separate from their fathers and, due to their dependent status, no protection from them. As Aristotle wrote, "The justice of a master or a father is a different thing from that of a citizen, for a son or a slave is property and there can be no injustice to one's own property" [49].

Before the Christian era, a child in some societies was not considered human until certain ceremonies were performed, after which infanticide was forbidden. For example, the Egyptian midwife prayed for the soul to join the newborn infant, and the father in Babylonia blew into the face of his child, imparting his spirit to the child. In Athens, the *amphidroma* ceremony was performed on the infant's fifth day, when the baby was carried around the ancestral hearth by its nurse to receive consecration and a name [36]. Receiving a name was very important to a child for it affirmed his identity and his right to life. If the father did not want the child, it was mandatory that he dispose of him before the *amphidroma*. It is frequently assumed that because the ancients freely condemned many of their infants to death, they had little regard for child life. In reality, however, the conditions of life were so difficult and resources so scarce that the ancients appear principally to have been concerned with raising the offspring who had a reasonable chance of survival. This attitude stimulated great concern for child care in the ancient world in order that children could grow up to be strong and healthy [14].

Many societies practiced child sacrifice, not only as a method of

population control or eugenics, but as a means to avert evil and ensure good fortune for the community. In China, India, Mexico, and Peru, for example, infants were cast into rivers as offerings to water gods to guarantee good harvests. The Egyptians, Phoenicians, Moabites, and Ammonites also sacrificed their infants in order to propitiate avenging gods. Sealing children within building foundations was a superstitious practice which endured from the time of the erection of the walls of Jericho in 7000 B.C. to sixteenth-century Europe. It was believed that the foundations would be strengthened by the interred children [36].

The Bible also contains many allusions to the ritual sacrifice of children. The New Testament word for "hell" is *Gehenna*, which is derived from *Ge-Hinnom*. *Hinnom* is a valley near Jerusalem where children were destroyed by being pushed into fires as sacrifices for Molech [3]. In Chronicles 28 : 3 King Ahaz "burnt incense in the valley of the son of Hinnom and burnt his children in the fire," and in Chronicles 33 : 6 King Mannaseh "caused his children to pass through the fire in the valley of the son of Hinnom." Other Biblical references to infanticide include the story of Moses, who was abandoned after the Pharaoh condemned the children to Egypt to death by drowning in the Nile. Left to float down the river in a basket, Moses was eventually saved by the Pharaoh's daughter and wet-nursed by a woman who turned out to be his own mother. In Genesis, the story is told of God's command to Abraham to sacrifice his son Isaac. When God recognizes Abraham's faithfulness, he spares Isaac's life and orders that a ram be substituted as a sacrifice. This marked the first case of substitution, where human sacrifice was forbidden by God himself.

Christianity is said to have begun with the "slaughter of the innocents" from which Jesus is presumed to have been saved. When Herod, the ruler of Bethlehem during the time of Jesus' birth, learned of the birth of this child who was born to be "King of the Jews," he became so disturbed that he ordered the massacre of all infants in the Bethlehem district [7]. According to Matthew 2 : 16, when Herod was mocked, he became "exceedingly wroth and sent forth and slew all the children that were in Bethlehem and in all the coasts thereof, from two years old and under." Jesus was saved by Joseph, who was warned in a dream to flee with the infant Jesus and his mother to Egypt, and to stay there until Herod died. In commemoration of this event, Innocents Day (December 28) has until recently been celebrated in many Christian countries by the ritual whipping of children [3].

Historically, one of the main functions of the Judeo-Christian tradition has been to counteract the widespread acceptance of infanticide. The customs of baptism and circumcision are both symbols of

the sacrifice of the child. According to Bakan, "As symbols they are substitutes for the sacrifice, and in this way they are redemptive. They are then actually ceremonies of acceptance rather than of sacrifice" [4]. Throughout human history, drowning has been a common form of infant murder. In the ritual of baptism, the child is saved from drowning, thus affirming its right to life and protection by the Church and the human family which the Church represents. Similarly, circumcision can be seen as an affirmation of the child's right to exist. It differs from baptism in that the form of sacrifice symbolized is stabbing rather than drowning, possibly a reference to the means by which Abraham planned to kill Isaac. After both baptism and circumcision, the child is given a name, which name bestows on him the right to life and bonds him with his family. The child is given not one but two names; Isaac is Isaac, the son of Abraham and Jesus is Jesus, the son of Joseph. The ceremonies are essentially a pledge by the father to protect his son, and an affirmation of the son's right to life.

It was not until the fourth century that public opinion in Greece and Rome turned against the practice of infanticide [1]. The Christian Church, heavily influenced by the teachings of the Jews, played a leading role in changing the moral outlook toward infanticide. With the concept of original sin, the Church countered the ancient notion that children lacked a soul at birth. Infanticide was believed to be wrong because it deprived children of baptism and thus as St. Augustine noted, a chance for salvation. The belief that even the unborn child had a soul did much to undermine the practice of infanticide as well as abortion, although the latter could be more easily hidden from others. The first edicts against infanticide and the selling of children into slavery were proclaimed by Constantine in 315 A.D. Constantine, the first Roman emperor to convert to Christianity, recognized that poverty often led parents to give up their children and mandated that magistrates give sufficient aid to poor parents to allow them to raise their children adequately [29].

It was not until 374 A.D., however, that laws were passed in Rome making infanticide, for the first time, a capital offense. The Theodosian Code, which was completed in 438 A.D., reflected the great influence of the Church in limiting infanticide and other acts deemed criminal and immoral [24]. As Payne wrote, "When Church and State unite in defense of the child's right to live, then, for the first time in history, religious and civil law became identical with human sentiment" [34]. These steps marked the beginnings of the notion of *parens patriae* (State as parent) and the rights of the state to intervene in family life on behalf of the child.

Unfortunately, infanticide did not stop there. It was practiced

throughout the Middle Ages and, by 1527, the latrines of Rome were said to "resound with cries of children who have been plunged into them" [12]. A high rate of infanticide continued to exist throughout the eighteenth and nineteenth centuries among both legitimate and illegitimate children, although the practice more commonly affected the latter. Legal prohibitions did not stop infant murder; rather, they altered its methods. After the fourth century, abandonment became a dominant motif of troubled parent-child relations.

ABANDONMENT

Exposure often led to death, but at least it provided a chance for survival. As Jonas Hanway observed in 1766, "It is much less difficult to the human heart and the dictates of self-preservation to drop a child than to kill it" [45]. Throughout the Middle Ages, thousands of children were exposed and abandoned by their impoverished parents. As one writer noted, "It [exposure] was practiced on a gigantic scale with absolute impunity" [28]. The practice was rendered easier by the hope that the foundling would be rescued, although that happened infrequently at best. Those who did manage to survive were often sold into slavery or prostitution; some had their teeth extracted for sale to the rich; and others were deliberately maimed to arouse pity, thereby making them more effective beggars.

In the hope of saving the lives of abandoned children, foundling homes were initiated in the eighth century. The first such home was begun by Datheus, Archbishop of Milan, in 787 A.D. Other foundling asylums later opened in Montpellier in 1010, Marseilles in 1199, Embeck in 1274, Venice in 1380, and in 1421, Florence, where the famous *Ospedale Degli Innocenti* (Hospital of the Innocents) was founded [1]. These institutions ultimately proved ineffective, however, for many infants died from overcrowding, poor child care, and an insufficient number of wet nurses. Great numbers of foundlings have characterized most of European history, especially in times of social and economic upheaval and war. In the late seventeenth century, St. Vincent de Paul, the patron saint of charitable societies, became distraught over the great number of infants left on the steps of Notre Dame and appealed to the ladies of the court to finance an asylum for abandoned children. Applying the biblical maxim, "Thou art thy brother's keeper," St. Vincent de Paul practiced charity among all of society's unfortunates and established in the public mind the needs of the poor for care and protection [48]. Similarly, in eighteenth-century England, a retired sea captain named Thomas Coram became so appalled by the tiny infants thrown onto the dust

heaps of London that he spent 17 years soliciting support for a foundling hospital. Established in 1741, the London Foundling Hospital sought to prevent child murder and the "inhuman custom of exposing new born infants to perish in the streets" [28]. Baskets were left outside the homes to receive the children, and the "tour" or turning box was built to keep the identity of the mother secret and to spare her shame and harassment. In the United States, foundling hospitals were not established until the middle of the nineteenth century when the New York Foundling Asylum was begun on Randall's Island in 1869. Before that time abandoned children were taken to almshouses where they mingled freely with the destitute. The noted social photographers Jacob Riis and Lewis Hine were instrumental in awakening late nineteenth-century America to the plight of abandoned and neglected children. It was believed that in New York City alone some 100,000 homeless urchins were said to wander the streets [5].

Despite good intentions, foundling homes were no panacea for the problems of abandoned children. Even in the best homes, it was common for more than half the babies to die within their first year. Nonetheless, demand for admittance to the homes remained high. In London, after the Foundling Hospital established an open admissions policy in 1756, pressure for admittance became so great that it led "to the disgraceful scene of women scrambling and fighting to get to the door, that they might be of the fortunate few to reap the benefit of the hospital" [28]. So great was the mortality that foundling hospitals, "instead of being a protection to the living, became, a charnel house for the dead" [28]. Although many of the children were illegitimate, a majority were believed to be legitimate children of couples unable to support them [45].

WET NURSING

A form of institutionalized abandonment common throughout history was mercenary wet nursing. Wet nursing had been denounced since antiquity by physicians such as Galen and Hippocrates, who pleaded with mothers to nurse "with your own unborrowed milk" [12]. Nonetheless, most parents who could afford it, and even many who could not, sent their infants to rural wet nurses immediately after baptism. Kessen wrote that a persistent theme in the history of the child is the reluctance of mothers to nurse their own babies [26]. Until the eighteenth century, when attitudes began to change, breast feeding was considered crude and below the dignity of the middle classes. Indicative of the extent to which wet nursing was practiced is the fact that of 21,000 children born in Paris in 1780, 17,000 were sent into the country to be wet nursed, 3,000 were